


UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.	242014US99CONT	
		First Inventor or Application Identifier	James W. HARRIS	
		Title	ANTI-FIRST-PASS EFFECT COMPOUNDS	
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application Alexandria, Virginia 22313		
<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)</div> <div>2. <input checked="" type="checkbox"/> Specification Total Sheets <input type="text" value="65"/></div> <div>3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets <input type="text" value="2"/></div> <div>4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages <input type="text" value="2"/><div>a. <input type="checkbox"/> Newly executed (original or copy)</div><div>b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)<div>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b).</div></div></div> <div>5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</div> <div>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<div>a. <input type="checkbox"/> Computer Readable Form (CRF)</div><div>b. Specification or Sequence Listing on :<div>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</div><div>ii. <input type="checkbox"/> Paper</div></div><div>c. <input type="checkbox"/> Statements verifying identity of above copies</div></div>		ACCOMPANYING APPLICATION PARTS <div>7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</div> <div>8. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</div> <div>9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</div> <div>10. <input type="checkbox"/> English Translation Document (if applicable)</div> <div>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</div> <div>12. <input type="checkbox"/> Preliminary Amendment</div> <div>13. <input checked="" type="checkbox"/> White Advance Serial No. Postcard</div> <div>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</div> <div>15. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div> <div>16. <input type="checkbox"/> Other:</div>		
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <div><input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: 09/916,500</div> <div>Prior application information: Examiner: Covington, R.K. Group Art Unit: 1625</div> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>				
18. CORRESPONDENCE ADDRESS Customer Number 22850 (703) 413-3000 FACSIMILE: (703) 413-2220				
Name: Richard L. Treanor		Registration No.: 36,379		
Signature: 		Date: 8/26/03		
Name:		Registration No.:		

08/26/03



Docket No. 242014US99CONT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) James W. HARRIS

SERIAL NO: New Application

FILING DATE: Herewith

FOR: ANTI-FIRST-PASS EFFECT COMPOUNDS

FEE TRANSMITTAL

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ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	14 - 20 =	0	x \$18 =	\$0.00
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<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$280 =	\$0.00
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Respectfully Submitted,

OBLON, SPIVAK, MCCLELLAND,
MAIER & NEUSTADT, P.C.

Date: _____

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